Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information units PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
_	CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR -	OTHER THAN OR SMALL ENTIT	
	FOR	NUM	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	
	SIC FEE CFR 1.16(a))								1	- MAIL	FE
TC	TAL CLAIMS		20					<u> </u>	OR		15_
	CFR 1.16(c)) DEPENDENT CLA	ims	minus 20 =		<u> </u>		\$ =	ļ	OR	× \$=	
(37	CFR 1.16(b))		minus 3 =		<u> </u>		\$=		OR	× \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ 9	s =		OR	+ \$ =	
* If the difference in column 1 is less than zero, enter "0" in column 2.					· •	TOTAL		OR	TOTAL		
		LAIMS AS AM	IENDEC) – PART II						•	
		(Column 1), (Column 2) (Column 3)					SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A	2.28.05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADI TION FE
	Total (37 CFR 1.16(c))	1. 8	Minus	20		× s	=		OR	X \$ =	
	Independent (37 CFR 1.16(b))	5	Minus	" 4	= /	×s	=		OR	× s 200 =	200
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))										200
_	I			(0.00		TO	= TAL		OR	+ \$ = TOTAL	
		•				ADI	D'L FEE		OR	ADD'L FEE	200 Pd.
		(Column 1)	r ————	(Column 2)	(Column 3)		· · · ·				ra.
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADE TION FEI
	Total (37 CFR 1.16(c))	•	Minus	••	=	× s	=		OR	X \$ =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	× s					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLARK (22.050 1.000)						= =		OR	× \$ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$ TOT	TAL D'L FEE		OR OR	+ \$ = TOTAL ADD'L FEE	
		(Caluma 4)		::	10.				•		
		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	Γ	· -	 1	ı		
		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADC TION. FEE
\$	Total (37 CFR 1.16(c))	•	Minus		=	x \$_	=		OR	x \$=	
AMENUMENT	Independent (37 CFR 1.16(b))	•	Minus .	•••	=	X \$_	=		OR	x s=	
⋛	FIRST PRESENTA	TION OF MULTIPLE	DEPENDE	NT CLAIM (37 CF	R 1.16(d))	+ \$	=		OR	+ 5 =	
	 					TOT			OR .	TOTAL ADD'L FEE	

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

• If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.